## UNITED STATES DISTRICT COURT RECEIVED NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

APR 2 2 2008

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KICHARD PRYMER	MICHAEL W. DOBBINS GLERK, U. S. DISTRICT COUR
LOSO WEST ST	
(Enter above the full name of the plaintiff or plaintiffs in this action)	08 C 50 0 69 Rewhand
VS.	Case No: 6 CF 3839
WINNE BAGO	(To be supplied by the Clerk of this Court)
County Justee	
650 WEST ST	
ROCKFOAD III	
(4/10/	
(Enter above the full name of ALL defendants in this action. Do not use "et al.")	
CHECK ONE ONLY:	
COMPLAINT UNDER THE U.S. Code (state, county, or n	E CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 nunicipal defendants)
COMPLAINT UNDER THE 28 SECTION 1331 U.S. Cod	CONSTITUTION ("BIVENS" ACTION), TITLE e (federal defendants)
OTHER (cite statute, if know	n)
BEFORE FILLING OUT THIS COMPLAIN	NT, PLEASE REFER TO "INSTRUCTIONS FOR

FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

ı.	Pl	aintiff(s):	
	A.	Name: KICHARD TRymer	
	B.		
	C.	List all aliases:	
	D.	Prisoner identification number: 26309	
	E.	Place of present confinement: WINNBRAGO COUNTY	
	F.	Address: 650 WEST ST ROCKFORD THE	
	4114	here is more than one plaintiff, then each plaintiff must list his or her name, date of birth, ses, I.D. number, place of confinement and current address according to the above format a separate sheet of paper.)	
II.	Defendant(s): (In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)		
	A.	Title: Correction Facility	
		Title: Correction FACILITY	
		Place of Employment:	
	B.	Defendant:	
		Title:	
		Place of Employment:	
	C.	Defendant:	
		Title:	
		Place of Employment:	

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

	A.	Name of case and docket number:
	B.	Approximate date of filing lawsuit:
	C.	List all plaintiffs (if you had co-plaintiffs), including any aliases:
	D.	List all defendants: ///A
	E.	Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county):
	F.	Name of judge to whom case was assigned:
(	G.	Basic claim made: X/A
I	H.	Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?):  57.11 Pending?
I,	•	Approximate date of disposition: 51/1 penDing 1//18/08
ADDITI FORMA YOU WI	IONA AT. R ILL N	E FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE L LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME EGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, OT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, RE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-

PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

## IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

WAS AMOST ON 10/5/06 ON 1//17/08 I ASK FOR A Speedy Trial, ON FEBRUARY S THIS WIAS THE 120 DAY OF CONFINE MENT PUT A MOTION TO DISMISS IN IN Sugge KUNALD WHITE COURT KNOW and HE DENY MY MOTION: SIDIEING THAT THE COURT COULD TAKE ME TO TRIAL OUM 120 DAY, BUT THE STATE WASN'T REDDY TO INC ceed To TriAl, Tily Coursel TriED OND COCEMED ME INIC TAKING a PLEA WATCH I lATER WITH DRAW AND all SHE HA DO 15 SAY LEST DO TO TRIPLE AND SHE CHAT HE CHANT TO MOTION TO WITHDAW MIC PMUNTH LATER 'NE NETT TO THAT I WAS CONVICT OF POSSESSION INTEST TO DELIVER, TURING THIS TIME! HAD XUMBERGES VYO'ATION AND FRORS.

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CO174/N 180,
COUNT (2) I was PENY RIGHT TO STATURION TRIAL
MITHIN 120 DAYS.
COUNT (3) VICINTED MY PIGHTS TO CONFRONT BY THE WITNESS
Appint me
COUNT 14) 1/10/AFEO, PREPROCESS OF THE 1ALL
CURIT & DELLY ME A FAIR TELES UNDER 14 AMERICANO
COUNT (is) EQUAL PROTECTION OF THE LAW.
WANT J DAMAGES I SUFFED AND LOST
my SuB my Cur Tuehout 4 Family
MMBERS DUR TO MERCHATION INP HAD
KOIDER CUP Surgery BEFORE COMING TO TOU
KAN GET THE REQUIRED MEDINE,
I've Suffered FOOT problems, They wouldn't
gove my stoes, I've Become over weight
Due To Bress, CART FUNCTION RIGHT etc.
Count (8) FAISE AMEST
Folse imprisoment
Talse conviction
malwous prosecution, + + volation of
My Constituted Rigitis,

## V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Twould like THIS CASE DISMISSED, And Compensated For principle Surgery mentionly to physicially, wrongful resused, wrongful TAMPRISIONMENT, Stander of my Nome of Character ETC.

VI. The plaintiff demands that the case be tried by a jury. X YES NO

## CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

